## Personal Details—Part A Employment Application Form



Application for post of:	

In line with our commitment to equal opportunities Part A including the sheet on conviction history will be removed on receipt and will not be seen by the short listing panel. Therefore your name and address will remain anonymous until the short listing process is complete. Criminal record history, if any, will only be disclosed to the interview panel after interviews have taken place and an offer of employment is to be considered.

Please read through this form before completing using **black ink** or type so it can be easily photocopied. Make sure you consider each of the points on the enclosed job description and person specification and show how you meet each condition. In accordance with best practice in equal opportunities we do not accept CVs. We believe that a standard application form is the fairest way of getting consistent and relevant information about applicants.

Personal Details	
Title: Surname:	Forename(s):
Nationality:	Date of Birth:
Address:	
	Postcode:
Contact Telephone Numbers and Times Available:	Home: Work: Mobile:
E-mail Address:	<u> </u>
Please specify what hours you wish to work	Full time
by ticking one of the following:	Part time (please state hours)
Disability: Please identify any special requirements or equirecruitment process:	uipment which may assist you in the

#### Do you require a work permit? Yes / No

In line with Section 8 of the Asylum & Immigration Act 1996, we will require all successful candidates (regardless of nationality or ethnicity) to provide original evidence of their identity and/or entitlement to work in the UK on receipt of an offer of employment.

We are entitled under the Act to refuse employment to any person unable to establish their right to work in the UK.

<b>1st Referee</b> —First referee, should be current employer or last employer if not currently employed.	<b>2nd Referee—</b> Second referee, should be former employer or another person prepared to supply a personal reference (who must not be a family member).
Name:	Name:
Position:	Position
Title/relationship:	Title/relationship:
Address and post code:	Address and post code:
Telephone no:	Telephone no:
Email address:	Email address:
Do you give us permission to contact them before interview?	Do you give us permission to contact them before interview?
Yes No	Yes No
If no, please give reason:	If no, please give reason:
Rehabilitation of Offenders Ac	t 1974 (Exceptions) Order 1975
	Rehabilitation of Offenders Act 1974 (Exceptions) n, older or vulnerable people. You are required to ions or cautions, even if they are classified as
Do you have a prosecution pending, or have been cautioned by the police for any offence	
Relationship to Trustees or Emp	loyees
Are you related to, or do you have a currer employees of this Company? <b>Yes / No</b>	nt personal relationship with any Trustees or
I declare that the information on this information may make me liable for d	
Signature:	Date:

# Information in support of your application—Part B Present employment or last employment if you are not currently employed.

Name of employer:	
Address of employer:	
Position held:	
Salary:	Grade:
Date employed from: mm yy	Date employed to: mm yy
Period of notice required:	
How many days sick have you taken in the last	2 years:
Main duties and responsibilities:	
Reason for leaving or wishing to leave your pre	sent post:
Do you have any additional employment which post? <b>Yes / No</b>	you intend to continue if appointed to this
If yes, please detail the nature of the work and	the hours:

## **Previous Employment / Work / Voluntary Experience**

Please list the **most recent first.** Please include periods of breaks in employment and the reasons for these.

Dates From/To	Employer	Position	Reason for Leaving	Salary on Leaving

### **Education and Training**

Please list all qualifications you have achieved: most recent first.

Place of Study	Course Studied and dates	Qualifications gained/ results achieved (details of subject grades etc. where known)	Year Obtained

lace of Study	Course / Qualificatio	n
	ng Courses Attended k related training. Documentary ev	idence will need to be provided.
Dates From/To	Name of College/ University/ Employer Course Title and Training Qualification Obtained	
Further Infor	mation	
Do you have a curr	ent driving licence? Yes /	No

Relevant skills and experiences that you would bring to this job Please use this page to show how your experience, skills and abilities are relevant to the post. This is probably the most important part of the application form. Selection for interview will be made on how well you demonstrate you meet the criteria in the person specification and job description. You may also use experience gained from voluntary, academic or hobbies.
If you need more space, please attach a separate sheet of paper. Make sure that on each page you write the post you are applying for. If your application is unsuccessful, the information on your application form will be kept for 6 months then destroyed.



action · help · advice

#### For further information please contact:

Carers Trust Tyne & Wear The Old School Smailes Lane Highfield Rowlands Gill NE39 2DB

Tel: 01207 549780 Fax: 01207 549794 Minicom: 01207 549098

Email: info@carerstusttw.org.uk Website:www.carerstrusttw.org.uk

If you require this document in other formats, please contact us

